

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	HB	JL-916	10-11-01
RESPONSE FORMALITY REVIEW	RM	481	01-01-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	08/10/01
2	21/28/01
3	02/03/01
4	04/04/01
5	05/05/01
6	06/06/01
7	07/07/01
8	08/08/01
9	09/09/01
10	10/10/01
11	11/11/01
12	12/12/01
13	01/01/02
14	02/02/02
15	03/03/02
16	04/04/02
17	05/05/02
18	06/06/02
19	07/07/02
20	08/08/02
21	09/09/02
22	10/10/02
23	11/11/02
24	12/12/02
25	01/01/03
26	02/02/03
27	03/03/03
28	04/04/03
29	05/05/03
30	06/06/03
31	07/07/03
32	08/08/03
33	09/09/03
34	10/10/03
35	11/11/03
36	12/12/03
37	01/01/04
38	02/02/04
39	03/03/04
40	04/04/04
41	05/05/04
42	06/06/04
43	07/07/04
44	08/08/04
45	09/09/04
46	10/10/04
47	11/11/04
48	12/12/04
49	01/01/05
50	02/02/05

Claim	Date
Final Original	
51	03/03/01
52	04/04/01
53	05/05/01
54	06/06/01
55	07/07/01
56	08/08/01
57	09/09/01
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94	10/10/04
95	11/11/04
96	12/12/04
97	01/01/05
98	02/02/05
99	03/03/05
100	04/04/05

Claim	Date
Final Original	
101	05/05/01
102	06/06/01
103	07/07/01
104	08/08/01
105	09/09/01
106	10/10/01
107	11/11/01
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109	01/01/02
110	02/02/02
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140	08/08/04
141	09/09/04
142	10/10/04
143	11/11/04
144	12/12/04
145	01/01/05
146	02/02/05
147	03/03/05
148	04/04/05
149	05/05/05
150	06/06/05

If more than 150 claims or 10 actions  
staple additional sheet here

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20/07/02  
10/07/02  
10/07/02